PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10830212

								1	100.		-10	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL TYPE	ENTITY	OF		R THAN L ENTITY
TOTAL CLAIMS			22				7	RATE	FEE		RATE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F			BASIC FE	
TOTAL CHARGEABLE CLAIMS			12 minus 20=		・ン		1	XS 9=			V540	1
INDEPENDENT CLAIMS			3 minus 3 =						18	-IOF	}	-
MULTIPLE DEPENDENT CLAIM P			PRESENT	RESENT			ľ	X43=	- `- -	OF	X86=	ļ
* If the difference in column 1 is less than zero, optor						. []	J	+145=	145	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II								TOTAL	347	OR	TOTAL	
	((Column 1)	AMENDE					SMALI	_ ENTITY	OR		RTHAN
_	1	CLAIMS	HIGH				ጎ ነ			_		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus			=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		=		X43=		OR	X86=	
-	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		1	000	
										OR	+290=	
								TOTAL ADDIT FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Columi	n 2)	(Column 3)						
CINI D		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENOMENI	Independent	*	Minus	***		=	ŀ	X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT C	LAIM		ŀ	+145=		1	+290=	
							L	TOTAL	<u> </u>	OR	TOTAL	•
		(0-1					Al	DDIT. FEE		OR A	DDIT. FEE	
7	`	(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Column		Column 3)						
		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	*	Minus	**		=	上	X\$ 9=	ree		X\$18=	FEE
	ndependent	* ·	Minus	***	1	=	-			OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=		OR	X86=	
								+145=		OR	+290= "	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR TOTAL ADDIT. FEE ADDIT. FEE												
Tr	e "Highest Numb	per Previously Paid	For (Total or	o SPACE is le: Independent)	ss than (is the hi	s, enter "3." ghest number f			ropriate box			